

BEST AVAILABLE COPY

POSITION	ID NO.		DATE
CLASSIFIER			
EXAMINER			
TYPIST			
VERIFIER			
CORPS CORR.			
SPEC. HAND			
FILE MAINT.			
DRAFTING			

INDEX OF CLAIMS

Claim		Date						
Final	Original	03/22/90	06/11/91	01/08/92	03/01/91	11/19/91	06/01/92	1/2/93
6		+	✓	✓	✓	✓	✓	✓
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15					✓	✓	✓	✓
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17					✓	✓	✓	✓
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19			✓	✓	0	=	✓	
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34			✓	✓	✓	✓	✓	✓
35			✓					✓
36								=
37								
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39			✓	✓	✓	✓	✓	=
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Claim		Date
Final	Original	
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SYMBOLS

- | | |
|---------------------|--------------|
| ✓ | Rejected |
| = | Allowed |
| - (Through numeral) | Canceled |
| + | Restricted |
| N | Non-elected |
| I | Interference |
| A | Appeal |
| O | Objected |

(LEFT INSIDE)